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PTO/SB/04 (10-00)  
Approved for use through 10/31/2002. OMB 0651-0032  
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**SUPPLEMENTAL  
DECLARATION FOR UTILITY  
OR DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Attorney Docket Number	019157-20
First Named Inventor	Karl Erich Fankhauser, et al.
<b>COMPLETE IF KNOWN</b>	
Application Number	09 / 770,166
Filing Date	January 26, 2001
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**Method and Apparatus for Locating and Exchanging Clinical Information**

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **01/26/2001** as United States Application Number or PCT International

Application Number **09/770,166** and was amended on (MM/DD/YYYY) (if applicable).

I hereby declare that the subject matter of the attached amendment amendment filed on was part of my or our invention and was invented before the filing date of the original application, above identified for such invention.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the natural or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]


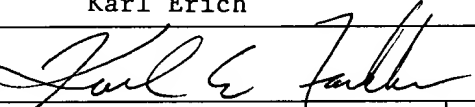
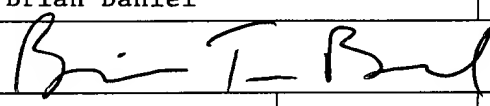
Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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SUPPLEMENTAL DECLARATION  DESIGN PATENT APPLICATION			
Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label		24239	AND <input checked="" type="checkbox"/> Correspondence address below
PATENT TRADEMARK OFFICE			
Name <b>Steven B. Phillips</b>			
Address <b>Moore &amp; Van Allen, PLLC</b>			
Address <b>2200 W. Main Street, Suite 800</b>			
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Country <b>USA</b>	Telephone <b>(919) 286-8000</b>	Fax <b>(919) 286-8199</b>	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name <b>Karl Erich</b>	Family Name or Surname <b>Fankhauser</b>		
Inventor's Signature 			Date <b>2/15/01</b>
Residence: City <b>Martinez</b>	State <b>CA</b>	Country <b>USA</b>	Citizenship <b>USA</b>
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City <b>Martinez</b>	State <b>CA</b>	ZIP <b>94553</b>	Country <b>USA</b>
Name of Second Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name <b>Brian Daniel</b>	Family Name or Surname <b>TerBush</b>		
Inventor's Signature 			Date <b>2/15/01</b>
Residence: City <b>San Francisco</b>	State <b>CA</b>	Country <b>USA</b>	Citizenship <b>USA</b>
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Mailing Address			
City <b>San Francisco</b>	State <b>CA</b>	ZIP <b>94102</b>	Country <b>USA</b>
<input type="checkbox"/> Additional inventors are being named on the ____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			